City of Rockford, Illinois Community & Economic Development Department

Community & Economic Development Department Construction and Development Services 425 East State Street, Rockford, IL 61104 Phone: (779) 348-7158 Fax: (815) 967-4243 TDD (815) 987-5718

Web: www.rockfordil.gov



APPLICATION FOR DEMOLITION CONTRACTOR LICENSE

Provisions set-forth in City of Rockford Code of Ordinances, Chapter 105, Article V, Sections 105-272 through 105-280 (attached).

Applicant for demolition contractor license shall provide sufficient detail to substantiate the qualifications of the applicant to engage in the type of demolition for which the license is applied for.

ALL APPLICANTS:	
1. Name	
City, State, Zip:	
	_
Owner of Company & Title:	
Phone Number	Mobile Number
Fax Number	E-mail
icense plate numbers and/or num necessary.	nbers on equipment. Use added sheets if
nsurance in the sum of \$1,000,00	nit shall provide proof of comprehensive liability 30 upon which the city shall be named as an a copy of your insurance to this application.
4. Are any contractors to be s ervices	ub-contracted to another contractor? No
f yes is checked, list sub-contrac	etor used:sion of a current license issued by the City of Rockford)
This contractor must also be in possess	sion of a current license issued by the City of Rockford)
License Applied for: Class A	Class B Class C

APPLICATION FOR CLASS "A" LICENSE:

A. <u>Overall Experience:</u> minimum 5 years actively engaged in demolition and three(3) years of experience over that time in the demolition of all of the following types of buildings..

DATES (START & END DATES)	NAME & ADDRESS OF COMPANY WORKED FOR	JOB TITLE &/or DUTIES
B. <u>Types of Building (3 year</u>1. Buildings over 2 storiesDates and Addresses of Buildings:	experience in demolition of all of to	l he following):
Buildings on a lot less that Dates and Addresses of Buildings:	an 10 feet from adjacent buildings or	sidewalks.
3. Buildings with party wall. Dates and Addresses of Buildings:	s or located immediately adjacent to a	a right-of- way.

APPLICATION FOR CLASS "B" LICENSE:

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of a Class "A" contractor.

 $\overline{3}$ years minimum of experience actively engaged in the business of demolition or completion of 10 buildings as listed below...

DATES(START DATE & END DATE)	NAME & ADDRESS OF COMPANY WORKED FOR	JOB TITLE &/or DUTIES
shall be limited to demolition		um of ten(10) buildings an
Buildings 2 stories or less Dates and Addresses of Buildings:		
Buildings 2 stories or less Dates and Addresses of Buildings:	5.	
Buildings 2 stories or less Dates and Addresses of Buildings:		
Buildings 2 stories or less Dates and Addresses of Buildings:	5.	
Buildings 2 stories or less Dates and Addresses of Buildings: 2. Buildings in excess of 10	5.	
Buildings 2 stories or less Dates and Addresses of Buildings: 2. Buildings in excess of 10	5.	

APPLICATION FOR CLASS "C" LICENSE:

A. Overall Experience:

2 years minimum of experience actively engaged in the business of building construction and/or demolition of accessory structures and/or detached garages associated with residential occupancies and successful construction and/or demolition of a minimum of 5 buildings...

 B. Types of Building Demolished shall be limited to demolition of 1. Buildings 1 story and less to Dates and Addresses of Buildings: 	of the following types).	and or five(o) buildings and
2. Buildings in excess of 10 feet Dates and Addresses of Buildings:	from adjacent buildings or sidewal	ks.
Detached accessory building	ngs or garages associated with res	sidential occupancies.

	es shall be good for one (1) calendar year e on December 31 st of the year issued.	or any part there	eof and shall
• The co	est for a license class:		
0	"A" shall be \$268 per year,		
0	"B" shall be \$140 per year,		
0	"C" shall be \$71 per year		
Procedure, the are true and and belief and	ties as provided by law pursuant to Se ne undersigned certifies that the stater correct, except as to matters therein s d as to such matters the undersigned es the same to be true.	ments set forth tate to be true	in this instrument on information
Signature of	f applicant	Date_	
	For office use on	ly	
	BUILDING DEPARTMENT	<u> TAPPROV</u>	<u>AL</u>
APPROVE	D BY:	DATE: _	
ISSUED BY	: CHRISTINA HARGROVE	DATE: _	
CLASS OF	LICENSE APPROVED FOR: A	<u>B</u>	<u>C</u>
I ICENSE #	:		
	<u> </u>		

CHECK #: _____ AMOUNT: ____

Account #: 1010-1000-60209 Project Code:DEMOP